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10/26/2010 HVUONG2		Thomas Lang	ger	1	(Depositor's name)		
01 FC+1501				Skon	e y	ans,	(Signature)
02 FC:1504	1510.00 OP 300.00 OP		October 22		, 2010		(Date)
APPLICATION NO.	SEXTION NO. FILING DATE 00 0		FIRST NAMED INVENTOR		ATTO	RNEY DOCKET NO.	CONFIRMATION NO.
10/540,953 06/27/2005 Etienne Annic 5284-61PUS 4050 TITLE OF INVENTION: SYSTEM AND METHOD FOR RESOURCE MANAGEMENT IN A TERMINAL CONNECTED TO A COMMUNICATION NETWORK							
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE D	JE PREV. PAID ISS	UE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1510	\$300	\$0		\$1810	10/22/2010
EXAMINER		ART UNIT	CLASS-SUBCLASS				
MITCHELL, DANIEL D		2477	370-447000				
 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. 1 COHEN PONTANI 2 LIEBERMAN & PAVANE LLP 3				
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Orange: France Montrouge, France							
Please check the appropriate assignce category or categories (will not be printed on the patent):							
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Authorized Signature Date October 22, 2010							
Typed or printed name Thomas Langer Registration No. 27,264							
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